



United States Department of Agriculture

Natural Resources Conservation Service

Please indicate the program you are applying for.

☐ **Student Career Experience Program** ☐ **Student Temporary Employment Program**

| | | |
|--|------------------|--|
| Name: | | |
| Social Security Number: | | Career Field: |
| Temporary Mailing Address: | | State: |
| City: | Zip Code: | Phone: |
| Temporary Phone: | | |
| E-Mail: | | U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Veterans Preference: <input type="checkbox"/> Five Point <input type="checkbox"/> Ten Point Disabled <input type="checkbox"/> Thirty Percent Compensable (Attach DD214, Application for 10-Point Veteran's Preference (SF 15), or Department of Defense or Department of Veterans Affairs documentation as appropriate.) | | |
| Date of Birth: | Place of Birth: | |
| School Attending: | Graduation Date: | Major: |
| Community Service: | | |
| Awards: | | |
| Leadership Examples: | | |

I certify that, to the best of my knowledge and belief, all of the information I have provided in this application is made in good faith. I consent to the release of information from schools, employers, and other individuals and organizations about my ability and fitness for Federal Employment.

Signature _____ Date _____

Please attach your resume to this application.

